

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL TYPE | ENTITY | OR | OTHER SMALL | | |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------|-----|--------------------------------------------|------------------|------------|---------------------|------------------------|-------|---------------------|------------------------|--|
| FOR | | NUMB | NUMBER FILED | | NUMBER EXTRA | | | RATE | FEE |] [| RATE | FEE | |
| ВА | SIC FEE | | | | | | | | 380.00 | OR | | 760.00 | |
| то | TAL CLAIMS | | 50 minus 20= | | • 30- | | | X\$ 9= | | OR | X\$18= | 540.00 | |
| | EPENDENT CL | | 3 minus 3 = | | | | | X39= | | OR | X78= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | +130= | | OR | +260= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 300,00 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL | ENTITY | OR | OTHER SMALL | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | PI | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | + 43 | Minus | ** | 50 | = 13 | | X\$ 9= | //7 | OR | X\$18= | | |
| | Independent | • 7 | Minus | *** | <u> </u> | = 4 | | X39= | 160 | OR | X78= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | i | +130= | | OR | +260= | | |
| 7 1 1 | | | | | | | | TOTAL ADDIT, FEE | 211 | OB | TOTAL ADDIT, FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | WDII. FEE | od | • | ADDII. FEE | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | PI | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | ** | | = | | X39= | | OR | X78= | | |
| | rino i PRESE | NTATION OF N | | CIN | JENT CLAIM | | ' [| +130= | | OR | +260= | | |
| | | | | | | | L | TOTAL DDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | | (Column 1) | | | Column 2) | (Column 3) | 1 | | | . = | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | PI | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | ** | | = | | X39= | | OR | X78= | | |
| | FIRST PRESE | NTATION OF N | IULTIPLE DE | PEN | DENT CLAIM | | ! | +130= | | OR | +260= | | |
| ** | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |